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Urban District Council of Caterham and Warlingham



ANNUAL REPORT  
of  
THE MEDICAL OFFICER OF HEALTH  
and  
CHIEF SANITARY INSPECTOR  
for the year  
1951.

June  
1952



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Mr. Chairman, Ladies and Gentlemen,

I have pleasure in presenting to you my Annual Report for 1951, this being my second Report as your Medical Officer of Health.

The same arrangement has been retained as last year, an appendix being provided to avoid interrupting the written matter unduly, and the Chief Sanitary Inspector's Report included as a separate report.

In general, it will be noted that the state of the public health in this District remained fairly satisfactory as judged by the vital statistics. The birth rate decreased very slightly but the corrected birth rate is still above that for the Country as a whole, and similarly, although there were slight increases in the crude and corrected death rates, both were much lower than the national death rate.

It is particularly pleasing to note that for the fifth year in succession, no maternal death occurred locally.

While there was a slight decrease this year in the infant mortality rate there is still room for improvement even if allowance is made for an unfortunate increase in 1950 of deaths due to unknown causes. More attention is needed to prevent the spread of infections to young babies, and excessive exertion should be avoided in the later months of pregnancy.

Similarly, although the cancer death rate has remained fairly steady in this District for some 20 years it is obviously very desirable to reduce the number of deaths from this cause, and here early diagnosis is all important. Any person noting a persistent lump, haemorrhage or pain which is not already under observation by a doctor, would be well advised to get such attention. The relief of a negative diagnosis is of almost as much importance as the early treatment of a recognised case.

On the whole, acute notifiable infectious disease was much less prevalent, the only notable increase being in cases of mild dysentery, mainly at the Mental Hospital. Only one mild case of poliomyelitis occurred.

For the fourth successive year no case of diphtheria was notified, but the occurrence of several definite cases early in 1952 is a warning that the practice of immunisation must not slacken but be intensified.

Decreases in both the incidence and death rates from tuberculosis occurred locally during 1951, but again these facts cannot be regarded as justifying relaxation of efforts towards further improvements.

Attention continued to be given to improving the environmental conditions of residents as and when practicable and the Sanitary Inspectors again made their most useful contribution towards improving the health of the District.

In conclusion it will be remembered that this report is essentially an annual survey of the health of the District by the Medical Officer of Health as required by the Minister. While the opportunity is taken to mention for the convenience of residents, some of the other health services operating in the area, it is suggested that reports such as this might have greater value if they dealt more comprehensively with at least the activities of all the local preventive health services.

The Authorities concerned recognise that a District like this only requires the appointment of a part-time Medical Officer of Health, and estimate that the officer appointed locally should spend rather less than one-fifth of his time in connection therewith, while the Deputy Medical Officer of Health should only be so engaged for an even smaller proportion of her time. Under the present arrangement the Medical Officer of Health also acts as Divisional School Medical Officer, and in that capacity presents a report on the School Health Services annually to the Divisional Executive, but this is not made public and has a limited circulation. Similarly, the Divisional Health Sub-Committee of the County Council is responsible locally for Maternity and Child Welfare, the District Nursing and Midwifery Services, and in part for Health Education. As Divisional Medical Officer, periodical reports are made to the Sub-Committee on these branches of the Health Service, but again no publicity normally results.

Although certain sections of the preventive Health Services are controlled centrally by the County Council it should be practicable, and might be thought preferable, for a Divisional Medical Officer to produce one comprehensive report for the whole of the area for the health of which he is responsible as Medical Officer of Health, or at least one comprehensive report for each District in that area. As the resulting report or reports should be of more value to all concerned, it is respectfully suggested that consideration should be given to this proposal at an opportune time.

May I conclude this introduction by again expressing my thanks to the members of the Council, to my colleagues and especially to the Chief Sanitary Inspector and the staff of the Public Health Department for the happy co-operation which has continued throughout the year.

I am, Mr. Chairman, Ladies and Gentlemen,

Your obedient Servant,

F. R. EDBROOKE

Medical Officer of Health.



# STATISTICS FOR 1951

Area (in acres)	8,250
Registrar General's estimate of the population at mid-year 1951	31,520
Number of Inhabited Houses December 1951 according to rate books	7,786
Rateable Value	£293,332
Sum represented by a penny rate	£1,176

## Live Births.

	<u>Total.</u>	<u>Males.</u>	<u>Females.</u>
Legitimate	454	246	218
Illegitimate	16	7	9
	<u>480</u>	<u>253</u>	<u>227</u>
Birth rate per 1,000 of the estimated population	...	15.23	
Corrected birth rate	...	15.99	

## Still Births.

	<u>Total.</u>	<u>Males.</u>	<u>Females.</u>
Legitimate	7	3	4
Illegitimate	1	1	-
	<u>8</u>	<u>4</u>	<u>4</u>
Rate per 1,000 total (live and still) births	...	16.39	

## Deaths.

	<u>Total.</u>	<u>Males.</u>	<u>Females.</u>
	310	159	151
Crude death rate per 1,000 of the estimated population	...	9.84	
Corrected death rate	...	10.32	

## Deaths of Infants under one year of age.

	<u>Total.</u>	<u>Males.</u>	<u>Females.</u>
Legitimate	17	10	7
Illegitimate	-	-	-
	<u>17</u>	<u>10</u>	<u>7</u>

## Death Rate of Infants under one year of age.

All infants per 1,000 live births	...	35.42
Legitimate infants per 1,000 legitimate live births	...	36.64
Illegitimate infants per 1,000 illegitimate live births	...	-
Deaths from measles (all ages)	...	0
Deaths from whooping cough (all ages)	...	1
Deaths from diarrhoea (under 2 years of age)	...	0

## HEALTH REPORT FOR 1951

The Urban District of Caterham, which was constituted in 1899, became the Urban District of Caterham and Warlingham in 1929, and as a result of the latest revision of boundaries in 1953, the original area of 2,438 acres has increased to 8,250 acres.

At the beginning of the century the population of Caterham was just under 10,000, including over 3,000 residents in the Guards Depot and St. Lawrence's Hospital. By the time the present Urban District was constituted the total population had become 17,590, and this steadily increased to the 1951 Census figure of 31,290. In the middle of 1951, the Registrar General estimated the total population, including the military, to be 31,520.

The District, which contains some of the most beautiful parts around London, is chiefly residential, with at least four centres of population partially separated from each other by tongues of the Green Belt which practically surrounds the District.

There are no heavy industries and many residents work in London or Croydon. Those working in the District are mostly connected with the military or the mental hospital, with building, a few light industries, or providing food or other services for the residents.

### VITAL STATISTICS

Birth Rate:- The crude birth rate of 15.23 was almost exactly the same as in 1950 and slightly above the average for the decade before the War. The corrected birth rate was still higher, 15.99. The war-time maximum locally, however, was 21.00 in 1942. (The birth rate for England and Wales in 1951 was 15.5)

Illegitimacy:- The percentage of illegitimate births fell from 2.7 in 1948 and 1949 to 2.1 in 1950, which was the lowest since 1928, but in 1951 it again rose slightly to 3.3. This still compares favourably, however, with the peaks of over 8% in 1919 and 1941-5.

Still Births:- The still birth rate of 16.39 per 1,000 total births was an improvement on 18.59 and 19.07 in the last two years and, in fact, is the lowest in the last 20 years. The average rate for that period was 29.91.

Death Rate:- The crude death rate for the District increased slightly from 9.46 to 9.84. As the age and sex distribution of the population is not quite typical of that of the Country as a whole, an adjustment is required which produces the corrected death rate of 10.32 which is comparable with the rate of 11.5 for England and Wales.

Causes of Death:- These are set out fully in Table II in the Appendix, and for the first time the ages at which death occurred are indicated.

As is usual, death from heart and



circulatory diseases formed the largest group, accounting for 145, or 47% of the total deaths (1% more than last year). In so far as this group includes many who died virtually of old age, an increase is to be welcomed. In 1951, 79% were 65 years of age or over at the time of death while 60% were over 75 years. (No comparable percentages can be given for preceding years, but of all deaths, 65% were 65 years or over and 45% were over 75 years).

The next commonest cause of death was the group of respiratory diseases, (excluding tuberculosis), 48 deaths (15%) and cancer, 45 deaths (14%). The cancer death rate of 1.43 per 1,000 population was almost exactly the average for the last 18 years and compares very favourably with the corresponding rate in other areas.

Infant Mortality Rate:- During the first ten years of this century, of every 1,000 babies born alive in this District, on the average 75 died before reaching their first birthday. In each successive period of ten years this proportion decreased, the averages being 67, 55, 36 and 38, the last being associated with an increase to 54 during the war years.

The infant mortality rate of 35 for 1951 was thus only slightly below the average for the last 25 years and is rather disappointing.

Reviewing the 17 deaths which occurred in 1951 among children under 1 year of age, it is found that the causes of death can be grouped as follows:-

Prematurity	-	7
Atelectasis	-	1
Congenital defects	-	3
Malignant disease	-	1
Broncho-pneumonia	-	2
Whooping cough	-	1
Meningococcal meningitis	-	1
Chronic poliomyelitis	-	1

Compared with this analysis for the preceding year, there was an improvement in the numbers dying from prematurity and atelectasis, but it was a misfortune that this was offset by a slight increase in the number of children having congenital defects, while 2 others died from rare conditions. The numbers dying from infections was exactly the same as in 1950.

Only 5 of these deaths occurred after the babies were a month old, hence the neonatal mortality rate, i.e. the number of deaths in infants under a month per 1,000 live births was 25 which is relatively high, though 4 less than in 1950.

Of the births notified during the year, a total of 28 were premature, and 5 of these occurred at home and 23 in institutions. Unfortunately one of the premature babies born at home died within a week, and 8 of those born in institutions died within 4 weeks. This suggests that 32% of the premature babies died in the first month.

Maternal Mortality:- It is most satisfactory to be able to report that for the fifth year in succession, no deaths have occurred among mothers which were associated with child birth. Compared with the average for the years 1921-46, this represents the saving of one mother's life annually.

# BIRTH-RATE, DEATH-RATE AND ANNUAL STILL-BIRTH RATES FOR THE YEAR 1951.

	Rates per 1,000 Home Population		Death Rates per 1,000 Home Population										Rates per 1,000 Live Births		Rates per 1,000 Live & Still Births.
	Live Births	Still Births	All Causes	Typhoid & Paratyphoid	Whooping Cough	Diphtheria	Tuberculosis	Influenza	Smallpox	Acute Poliomyelitis & Polioencephalitis	Pneumonia	Diarrhoea & Enteritis (under two years)	Total Deaths under one year.	Gestals - Maternal Mortality	Other Causes - Maternal Mortality
England and Wales	15.5	0.56	12.5	0.00	0.01	0.00	0.51	0.53	0.00	0.00	0.61	1.4	29.6	0.10	0.39
126 County Boroughs and Great Towns including London.	17.3	0.45	15.4	0.00	0.01	0.00	0.34	0.53	0.00	0.01	0.65	1.6	33.9		
148 Smaller Towns (Resident Populations 25,000-50,000 at 1931 census).	16.7	0.58	12.5	0.00	0.01	0.00	0.31	0.58	0.00	0.01	0.63	1.0	27.6		
London Administrative County	17.8	0.37	13.1	-	0.01	0.00	0.38	0.23	-	0.00	0.61	0.7	26.4		
Ceterham & Worthingham Urban District	13.9	0.26	10.3	0.06	0.03	-	0.12	0.34	-	-	0.76	-	55.4		

A dash (-) signifies that there were no deaths.  
# Corrected rates



## INFECTIOUS DISEASES

Table III in the Appendix shows the number of cases of infectious disease notified during the year, the ages and distribution throughout the District of these cases and the number of deaths from this cause.

### Diphtheria.

For the fourth year in succession no notification of a case of diphtheria was received, which is very gratifying.

Preceding the institution of a diphtheria immunisation scheme in this District at least 10 cases of diphtheria occurred each year, and in most years at least one of the sufferers died.

The saving in life, incapacity, hospital bed space, manpower and expense which has resulted from the absence of this disease for four years is one of the most outstanding contributions of the Health Service in recent years. To maintain this very satisfactory state, it is imperative for parents to ensure that the immunity of their children against diphtheria is maintained. The occurrence of several definite cases among adults in the District early in 1952 is a warning that relaxation of the practice of immunisation dare not be permitted.

### Scarlet Fever.

A total of 41 notifications of this disease was received including 8 affecting military personnel, which is slightly below the average for recent years. Fortunately the disease remained of a very mild type, and in fact only one death has occurred from this cause during the last 10 years, compared with 4 in the preceding 20 years. On the other hand, the mildness of the present disease naturally increases the difficulty of preventing its spread.

### Erysipelas.

There were only 3 notifications of erysipelas, 2 being inmates of St. Lawrence's Hospital, compared with a total of 12 last year.

### Puerperal Pyrexia.

For the third year in succession no case was notified, compared with a preceding average of 1 case a year.

### Enteric Fever.

Two cases of typhoid fever (Phage N) were notified during the year, and they were transferred to an Infectious Disease Hospital where death occurred. The source of the infection could not be ascertained.

### Dysentery.

No less than 36 cases of dysentery were notified which is the highest for many years, but all but 3 were associated with St. Lawrence's Hospital. All were of the Sonne variety and no deaths occurred.

### Food Poisoning.

Only 1 case notified during the year was accepted as having probably suffered from food poisoning, the symptoms appearing very soon after some mushrooms had been consumed. It was unfortunately impracticable to examine any specimens in connection with this out-break, but the history and symptoms were very suggestive.

On 4 occasions suspected out-breaks involving single families or individuals were investigated without any positive evidence being obtained. Similarly a report was received indirectly that 57 old people out of a party of 60, who had been for an outing to the sea coast, had experienced gastro-intestinal disturbance possibly due to C. Welchii. Enquiries of the doctors in the District, however, failed to elicit one notification.

### Poliomyelitis.

Fortunately this disease was less prevalent generally during 1951 and only 1 non-paralytic case was notified, that being a school child who completely recovered.

### Meningococcal Infection.

No case of meningococcal meningitis was notified during the year, but a few persons are known to have suffered from a milder infection which is allied to non-paralytic poliomyelitis, but is not compulsorily notifiable.

### Measles.

Local out-breaks of measles normally occur in alternate years and 1951 was an epidemic year, with 610 notifications compared with 21 in 1950. No deaths occurred, however, and in fact only 3 have occurred locally in the last 12 years.

It is doubtful whether the notification of measles serves any useful purpose in a District such as this. General advice and measures aiming at the postponement of the infection until the children are old enough to withstand the disease and its complications, are all that can be undertaken with hope of success by the Health Department. In epidemic times, the number of notifications is so heavy that only a proportion can be visited, and then it is usually found that, owing to the inevitable delay in diagnosis and notification, no further effective advice on prevention can be given by the Department. Fortunately, modern methods of treatment have greatly reduced the risks of complications, and the National Health Service has resulted in more cases getting skilled medical attention from the first. The private doctor thus has a unique opportunity to disseminate sound advice.

### Whooping Cough.

There were 146 notifications of this disease in 1951 which is much the highest number for this District. Unfortunately one young baby died of complications resulting from whooping cough.

Judging by the number of notifications received there appears to have been no regular periodicity locally in respect of whooping cough, the recent peak years for notifications having been 1941, 1944 and 1949. However,



as the total in 1949 was much the highest until 1951, it may be that the practice of notifying these cases is now becoming more customary, in which case the system of notification has the one advantage of giving a more complete picture of what is happening in the District.

Apart from this possible advantage similar considerations affect the notification of whooping cough as have been noted concerning the notification of measles, with the exception that the delay between on-set and notification is almost inevitably longer. The fact that the fatal case was not notified until several days after death had occurred illustrates this point forcibly. The chief hope for the reduction of ill-health caused by whooping cough lies in the general adoption of an officially recognised scheme for immunisation when this is practicable, as it may be in the comparatively near future.

### PREVENTION OF ACUTE INFECTIOUS DISEASE

As previously suggested, the chief hope in the prevention of the most important infectious diseases now lies in some form of immunisation when it is practicable and desirable to recommend it for all children. Pending such measures, it is the practice to exclude cases and in some instances, contacts from school, and thus possibly by diminishing the degree of infection, to reduce the number and severity of the cases which occur. The main aim is to postpone the onset in infants until at least school age is reached. These steps can obviously be only partially successful, however.

#### Diphtheria Immunisation.

The success of this procedure has already been referred to and the necessity for maintaining the standard of immunity among the population against the risk of the disease again becoming a major cause of illness and death.

During 1951, 379 primary courses were given, which was about the same as in 1950, but owing to the risk of poliomyelitis being slight, the number of children who were "boosted" in this District was increased from 120 to 627.

It was estimated at the end of the year that 50% of the children under 5 years of age had been immunised and 90% of the children aged 5 - 15 years.

#### Vaccination.

During the year the following vaccinations were performed in this District:-

Primary Vaccinations	0 - 14 years ...	398
"	over 15 years ...	75
Revaccinations	0 - 14 years ...	65
"	over 15 years ...	223

There was a very substantial increase in all these figures compared with the previous year; probably as a result of the proximity of the Brighton out-break of smallpox, a number of residents having been direct or indirect contacts.



## Tuberculosis.

The following table shows the ages for each sex at which, during 1951, new cases were notified, and deaths occurred from both forms of tuberculosis.

AGE PERIODS	New Cases				Deaths			
	Respiratory		Non Respiratory		Respiratory		Non Respiratory	
	M	F	M	F	M	F	M	F
0 -	-	-	-	-	-	-	-	-
1 -	-	-	-	-	-	-	-	-
5 -	1	-	-	-	-	-	-	-
10 -	-	-	-	-	-	-	-	-
15 -	1	1	-	-	-	-	-	-
20 -	1	-	-	-	-	-	-	-
25 -	1	-	-	2	2	-	-	-
35 -	2	-	-	-	-	1	-	-
45 -	1	1	-	-	-	1	-	-
55 -	1	-	-	-	-	-	-	-
65 and upwards	-	-	-	-	-	-	-	-
TOTALS	8	2	-	2	2	2	-	-

Each of these totals shows a distinct improvement compared with 1950 which is emphasized in the following table showing the average five-yearly rates for the last 30 years and the actual rates for 1951. (In order to avoid decimals, the rates per 100,000 population have been given).

### AVERAGE RATES PER 100,000 POPULATION, for the quinquennial periods 1921 - 50.

YEARS	Case Rate		Death Rate	
	Pulmonary Tuberculosis	Non-Pulmonary Tuberculosis	Pulmonary Tuberculosis	Non-Pulmonary Tuberculosis
1921-25	72	11	58	9
1926-30	68	21	44	12
1931-35	79	20	30	9
1936-40	70	34	37	8
1941-45	88	41	45	10
1946-50	102	27	26	7
1951	52	6	13	-

It is unwise to deduce too much when dealing with relatively small figures, but the latest statistics are encouraging. While it may not be possible to maintain or improve upon them in the near future, every endeavour should be made to do so.

The Mass X-ray Unit which visited Caterham for the first time in November 1950, functioned for a period in South Croydon in the Autumn of 1951, this being the nearest centre which could be found to meet the most urgent needs of the area as a whole. More Units will be needed if full use is to be made of this means of early detection and annual re-inspection. Other needs are the provision of more hospital beds, the encouragement of immunisation and segregation of contacts, and preferential treatment of cases in the matters of rehousing and rehabilitation. There still remains, however, an individual responsibility upon each adult resident to take all reasonable precautions.

The Council continues to be responsible for two measures aimed at combating this disease, viz, rehousing and disinfection, but the County Council bears the responsibility for all other preventive measures except the treatment of cases, which has passed to the Regional Hospital Boards. A scheme for the immunisation of certain sections of the population is being instituted, and it is hoped that still more beds for treatment will become available.

The Local Tuberculosis Clinic is held every Monday from 2 - 4 p.m. at the Surrey County Council Clinic, 62, Whytecliffe Road, Purley, and any suspected cases can attend or be referred for diagnosis.

#### Non-notifiable Infectious Diseases:- Scabies.

The arrangements were continued whereby cases of this disease could be provided with the necessary treatment and, what is more important, contacts with them could be given preventive treatment.

Fortunately, the incidence of this complaint has been greatly reduced as illustrated by the following number of actual cases treated annually by the Health Department since 1942, viz, 82, 182, 137, 384, 240, 90, 34, 13, 3, and 4 in 1951.

Cases are still occurring, however, and greater use might be made of the services of the Public Health Department in an attempt to abolish this disease. Unless the home conditions and degree of co-operation of the family are exceptionally good, it is suggested that the normal practice should be to inform the Medical Officer of Health, who will see that the requisite advice and treatment or medicaments are given as tactfully as possible.

#### Bacteriological Examinations.

The following specimens were examined at the Epsom laboratory during the year:-

Throat swabs	36
Blood	3
Faeces	31
Sputa	11
Miscellaneous	21
	<u>102</u>

#### SANITARY CONDITIONS.

##### Water.

The water supply for this District, which is constant, is obtained from the East Surrey Water Company which has works and resources in neighbouring areas. The supply is lime softened and chlorinated, and throughout 1951 was satisfactory both in quality and quantity.

By an arrangement with other Districts receiving this supply, samples of the water going into supply are submitted for bacteriological examination quarterly in accordance with an agreed rota, the results being circulated. All the results were satisfactory during 1951.



In addition, one sample was taken from a house in Caterham and submitted for chemical examination with the following result:-

CHEMICAL EXAMINATION.	Parts per 100,000	Grains per gallon.
Total solids (dried at 180°C) ...	14.0	9.8
Combined chlorine (as Cl) ...	1.9	1.3
equivalent to sodium chloride (NaCl) ...	3.1	2.2
Nitric nitrogen (nitrates) ...	0.56	0.39
Nitrous nitrogen (nitrites) ...	Faint traces present	
Ammoniacal nitrogen ...	0.0004	0.0003
Albuminoid nitrogen ...	0.0004	0.0003
Oxygen absorbed in 4 hours at 27°C	Nil	Nil
Lead or Copper ...	Nil	Nil
Temporary hardness (equivalent to CaCO <sub>3</sub> ) ...	3.0	2.1
Permanent hardness ( " ) ...	3.0	2.1
Total hardness ( " ) ...	6.0	4.2

All dwelling houses provided with the Company's water have the supply within the premises, and standpipes are non-existent. Only 11 dwellings (approximately 0.1%) in an undeveloped rural section of the District are without a public water supply and the cost of extending the water main to these properties is not regarded as reasonable by the Council.

Samples are also taken when considered desirable from sources other than the above which are utilised in the District, and during the year closer co-operation was established with the Laboratory Service of the London County Council who continue to supervise the private supply to St. Lawrence's Hospital.

#### Drainage and Sewerage.

Some sewers were extended to make provision for the drainage of new Council Estates, but no important works of sewerage were undertaken in 1951. Additional sewers are required in Caterham, Chaldon and Woldingham and in 1944 the Council approved in principle schemes estimated to cost over £88,000. Recently, preliminary consideration has been given to extending the sewers at Chaldon immediately the economic situation permits.

#### Closet Accommodation.

A number of pail closets exists in the unsewered rural parts of the District and must await conversion until the sewers are extended to such areas.

#### Public Cleansing.

##### 1. Collection and Disposal of House Refuse.

This branch of public cleansing is carried out by the Engineer & Surveyor's department in this District, and a weekly collection throughout the District was maintained.

Negotiations for additional land suitable for the tipping of refuse were satisfactorily completed during



1950, and tipping on the new site began in December of that year. Fortunately a very adequate supply of ash for cover is available.

## 2. Cesspool Emptying.

Details of this service are given in the Chief Sanitary Inspector's report.

## Sanitary Inspection of the Area.

Details of the sanitary inspection of the District which is carried out as circumstances demand and permit are also given in the Chief Sanitary Inspector's report.

## Swimming Baths.

There is no swimming bath in the District which is owned by the public, but there is one to which the public is admitted on payment, and another owned by a school, both of which are kept under regular supervision.

Five satisfactory and one unsatisfactory samples were taken from the former during 1951, and two good samples from the latter.

Both baths are equipped with filters and chlorination plant.

## Schools.

Close co-operation exists between the local Health Department and the members of the Divisional School Health Service as your Medical Officer of Health is also Divisional School Medical Officer, while the main clinic is situated in the same building as the Health Department, an advantage which is often not fully realised.

While there is room for improvement in the schools generally, both from the point of view of their structure and the health facilities, and two should be evacuated as soon as practicable, progress in effecting improvements is inevitably slow. Unfortunately, there are other areas in the County with schools which are even more sub-standard, hence, with the present limitation of public expenditure, the local schools can only obtain a small fraction of the County expenditure on these services. Gradually, however, slight improvements are being made.

The public water supply is available at all the schools and only 2 are not connected to the sewers, although they now have a water carriage system.

As suggested earlier, the Head Teachers are advised on school exclusions in an attempt to reduce the spread of infectious disease, while cases known by them to be suffering from communicable diseases are notified to the Medical Officer of Health.

## Factories and Workshops.

The usual table indicating the inspections made, defects found and defaults notified during 1951 is included as Table IV in the Appendix.

## Housing.

Similarly the Housing statistics are presented as Table V in the Appendix. It is well recognised how difficult the housing problem remains in spite of the endeavours of the Local Authorities and others to provide additional and better accommodation. This is one of the fundamental facts underlying many of our social problems, including that of improving the public health, and it has rightly been given some degree of priority in the present distribution of the national resources of manpower, materials, etc. It will be seen by referring to the statistics that some progress was made during 1951 and it is hoped that still more will result this year.

## Inspection and Supervision of Food.

As the Sanitary Inspectors are primarily responsible for the inspection and detailed supervision of the food supply, details of this service are given in the Chief Sanitary Inspector's report.

In general, a slow but steady improvement in the hygienic production and distribution of foods is observable where they come within the sphere of influence of the local Sanitary Inspectors. Further advances are, however, to be desired, especially in matters not coming directly within their purview.

## Chemical and Bacteriological Examinations of Food.

Examinations of milk and ice-cream were carried out by the Public Health Laboratory Service.

## Adulteration.

The County Council is the Food & Drugs Authority for this District and a statement of the number of samples collected and examined by their officers during 1951 is included as Table VI in the Appendix.

## OTHER HEALTH SERVICES

The Surrey County Council is the Local Health Authority for this area and in the execution of its duties under the National Health Service Act 1946, the following arrangements have been made:-

### 1. Ambulances.

There are two County Council ambulance stations in the District which are mainly manned by volunteers from the St. John Ambulance Brigade:-

Timber Hill Road  
Caterham Valley.

Caterham 3178

c/o Green Circle Garage,  
Limpsfield Road,  
Warlingham.

Upper Warlingham  
2681



Maternity and Child Welfare.

(a) Midwives and District Nurses.

This service is passing through a transitional stage  
t at present arrangements are as follows:-

Mrs.D.Smith, 74, Foxon Lane, Caterham-on-the-Hill.(Cat.3766)	Full time General Nurse covering Caterham Valley,Whyteleafe and Woldingham.
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Miss J. G. Baillie, 13, Warren Park, Warlingham.(Upper Warl.258)	Full time Midwife covering Caterham Valley,Warlingham, Whyteleafe and Woldingham.
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Mrs. E. Battle, 44, Church Road, Warlingham.(Upper Warl.405)	Full time General Nurse covering Warlingham and area.
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Miss A.M.Johnson, 8, Foxon Lane, Caterham-on-the-Hill.(Cat.2742)	Full time Midwife and General Nurse covering Caterham-on-the-Hill and Chaldon.
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Miss B.B.O'Keefe, 8, Foxon Lane, Caterham-on-the-Hill.(Cat.2742)	Full time Midwife and General Nurse covering Caterham-on-the-Hill and Chaldon.
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(b) Ante-Natal Clinics.

Pelham House, 54,Harestone Valley Road, Caterham Valley.	2nd, 4th and 5th Friday in each month - 2 p.m.
--	---

The Health Centre, Westway, Caterham-on-the-Hill.	1st, 3rd and 5th Tuesday in each month - 2 p.m.
---	--

The Church Hall, The Green, Warlingham.	2nd, 4th and 5th Wednesday in each month - 2 p.m.
---	--

(c) Child Welfare Clinics (including  
Diphtheria Immunisation and Vaccination).

Pelham House, 54, Harestone Valley Road, Caterham Valley.	Tuesdays 2 p.m.
---	-----------------

The Health Centre, Westway, Caterham-on-the-Hill.	Fridays 1.30 p.m.
---	-------------------

The Church Hall, 399, Limpsfield Road, Warlingham.	Tuesdays 2 p.m.
--	-----------------

St. Luke's Church Hall, Whyteleafe Hill, Whyteleafe.	Thursdays 2 p.m.
--	------------------

The Parish Hall, Station Road, Woldingham.	1st and 3rd Friday 2 p.m.
--	------------------------------



(d) Family Planning Clinic.

The Health Centre,  
Westway,  
Caterham-on-the-Hill.

2nd Tuesday in each month 2p.m  
(By appointment with  
Divisional Medical Officer,  
115, Brighton Road, Purley.  
Uplands 9277)

(e) Home Help Service.

Applications for the service of a Home Help should be addressed to the Home Help Organiser, 115, Brighton Road, Purley. In case of emergency the following telephone numbers may be used:- Uplands 7014 or 9277 preferably between 9.30 and 10.30 a.m. Home Helps can only be supplied to cases genuinely needing their assistance in which ill-health or old-age are involved. The capacity of the Service is limited, but preference is given to those in the greatest need, the degree of help varying with the physical and social circumstances of the family.

(f) Consultant Service.

The general practitioners have been supplied by the Regional Hospital Board with particulars of the Specialists whose services are available in the District.

(g) Emergency Units.

The Emergency Unit or "Flying Squad" based on Redhill County Hospital is available at any time for bona fide service in this District.

(h) Health Visitors.

Initial contact with Health Visitors may be made through the Divisional Medical Officer or the Divisional Health Visitor at 115, Brighton Road, Purley. The three Health Visitors serving this District are based on:-

(a) Pelham House, Cat.1010. Ex.29  
54, Harestone Valley Road,  
Caterham Valley.

(b) The Health Centre, Cat.2320  
Westway,  
Caterham-on-the-Hill.

(c) (For Woldingham and Warlingham)  
The Divisional Office, Upl.9277  
115, Brighton Road, Purley.

3. School Medical Service.

(a) Minor Ailments Sessions:-

Pelham House,  
54, Harestone Valley Road,  
Caterham Valley.

Tuesday 1.30 - 2 p.m.

The Health Centre,  
Westway,  
Caterham-on-the-Hill.

Wednesday 9.30 a.m.

The Church Hall,  
399, Limpsfield Road,  
Warlingham.

Tuesday 1.30 - 2 p.m.

St. Luke's Church Hall,  
Whyteleafe Hill,  
Whyteleafe.

Thursday 1.30 - 2.0 p.m. .

- (b) Dental Clinic (also available for pre-school children and antenatal/nursing mothers).

Pelham House,  
54, Harestone Valley Road,  
Caterham Valley.

Monday 9.30 a.m. and  
1.30 p.m.  
Tuesday 9.30 a.m.  
Wednesday 9.30 a.m.  
Thursday ) and  
Friday ) 1.30 p.m.

- (c) Ophthalmic and Refraction Clinic ) By appointment with  
(d) Speech Therapy Clinic ) Divisional Medical  
(e) Remedial Exercises Clinic ) Officer, 115, Brighton  
Road, Purley.

#### 4. Day Nurseries.

The two Day Nurseries at present functioning in this Division are situated as follows:-

"Hazelglen" Day Nursery, Sanderstead Road, Sanderstead.

(Sanderstead 5329)

Matron: Miss J. Davison

Old Coulsdon Day Nursery, Bradmore Green, Old Coulsdon.

(Downlands 4071)

Matron: Mrs. L.C. Bryan,  
S.R.N.

Admission to the Day Nurseries is limited to children from families in which the mother is the sole wage earner, where there is sickness in the family or where the home conditions are likely to seriously prejudice the health of the child.

#### 5. Diphtheria Immunisation and Vaccination.

Under the National Health Service Act, 1946, diphtheria immunisation and vaccination can be obtained from general practitioners serving under the Act, or arrangements can be made by application to the Medical Officer of Health, Pelham House, 54, Harestone Valley Road, Caterham.

#### 6. Loans of Medical Equipment.

The County Council has arrangements with the British Red Cross Society and the St. John Ambulance Brigade, whereby certain equipment required for patients being nursed in their houses can be hired. Application should be made to Mrs. G. Luke (B.R.C.S.) 104, Harestone Valley Road, Caterham, (Caterham 628) or to the Officer-in-Charge, S.J.A.B. Headquarters, Timber Hill Road, Caterham (Caterham 5178)

#### HOSPITALS.

The Regional Hospital Boards are responsible for the hospitals and for staffing certain clinics.

##### 1. Local Hospitals.

The hospitals chiefly serving this District are:-



Redhill County Hospital ...	Redhill 3581
Caterham & District Hospital	Caterham 52
Caterham & District Hospital Annexe (The Dene)	Caterham 2006

## 2. Clinics.

### Tuberculosis

62, Whitecliffe Road, Purley. (Upl.3549)	Every Monday 1.30 - 3.30 p.m.
---	----------------------------------

### Venereal Disease

Croydon General Hospital

#### Males.

Tuesday 7 p.m.  
Saturday 10.45 a.m.

#### Women & Children

Wednesday 2.30 p.m.  
Thursday 11.00 a.m.  
Friday 5.30 - 7 p.m.

Redhill County Hospital

#### Males.

Monday 5 - 7 p.m.

#### Females.

Wednesday 5 - 7 p.m.

## LABORATORY FACILITIES.

The bacteriological examination of throat swabs, sputa, blood, milk, water etc, is carried out by the Public Health Laboratory Service at West Hill House, West Hill, Epsom. (Epsom 2747)

The facilities afforded by the Clinical Research Association of London are also available for certain specimens and for the chemical examination of water.

## MISCELLANEOUS ADDRESSES.

Principal Divisional Welfare Officer, 108 Windermere Road,  
Coulsdon. (Upl.0776)

Mental Health/Authorised Officer. 44 Reigate Hill, Reigate  
(Reigate 3357)

Blind Welfare Visitor: 53, Abbey Road, Selsdon. (San.2790)

Guild of Social Service /Citizens Advice Bureau; 105 Brighton  
Road, Purley, (Upl.6800)

Caterham & District Old People's Welfare Assn: 6, Dome Hill Peak,  
Caterham. (Cat.3081)

Old Peoples Homes: "Santa Tecla", Stanstead Road, Caterham (Cat.2641)

Browning Bethany Homes; 60, Whyteleafe Hill, Whyteleafe. (Upl.0442)

W.V.S. (Meals on Wheels) 102, Godstone Road, Caterham (Cat.2243)

Moral Welfare Visitor: 1, Sunny Rise, Caterham-on-the-Hill. (Cat.3728)

Marriage Guidance Council: 38, Russell Hill, Purley. (Upl.9029)

N.S.P.C.C. 37, Hartley Road, Croydon. (Tho. Heath 4250)

48, Grove Hill Road, Redhill. (Redhill 2388).



REPORT OF THE CHIEF SANITARY INSPECTOR.

Mr. Chairman, Ladies and Gentlemen,

I beg to submit my report for the year 1951.

COMPLAINTS.

581 complaints were received as follows:-

Re drainage and sanitary defects	...	188
" housing defects	...	100
" rats and mice	...	157
" insect pests	...	70
" foodstuffs	...	12
" nuisances from refuse	...	21
" nuisances from the keeping of animals	...	7
" alleged overcrowding	...	18
" dirty premises	...	4
Miscellaneous	...	4
		<hr/>
		581

The number of complaints made to this department in 1951 exceeded by 31 the total for the previous year. The post-war figure appears to be stabilised around the 500-600 mark; the figure for the 1930's varied from 85-168.

INSPECTIONS.

The following table sets out the visits made by Sanitary Inspectors during the year:-

Primary Inspections of premises	...	509
Re-inspections after service of notices	...	1294
Visits to Work in progress	...	412
" " Caravans or camping sites	...	54
" " Factories (excluding Bakehouses)	...	103
" " Workplaces	...	26
" " Bakehouses	...	87
" " Dairies	...	117
" " Other Food Premises & Food Delivery Vehicles	...	593
" " Schools and/or School Canteens	...	12
" " Stables and Piggeries	...	24
" " Hairdressors' and Barbers' premises	...	36
" " Swimming Baths	...	7
" " Shops under Shops Act	...	285
Patrols under Shops Act	...	32
Visits re Overcrowding	...	33
" " Rodent Control (including testing, etc, of sewers)	...	985
" " Insect Pests	...	81
" " Notifiable Infectious Diseases	...	200
" " Cesspool Emptying	...	157
" " Health Education Publicity	...	19
" " Milk and Ice-cream Samples	...	302
" " Water Samples	...	30
Miscellaneous Visits	...	560
		<hr/>
		5958

# SANITARY IMPROVEMENTS.

The following improvements were carried out:-

Premises drained to sewer	...	3
Defective drains relaid or repaired	...	28
Cesspools, provided, reconstructed, enlarged, repaired or abolished	...	6
Soakaways provided for rain and surface water	...	12
Drains unstopped and cleansed	...	145
Inspection chambers repaired or renewed	..	4
Inspection chamber covers renewed	...	11
Inspection chamber covers sealed	...	14
Ventshafts or soilpipes repaired	...	6
Pail closet abolished and replaced by W.C.	...	1
W.C. fittings provided, repaired or renewed		28
W.C.'s provided with new pans and traps	...	7
New sinks fitted	...	5
Curbs and channels to sink waste gulleys repaired or renewed	...	14
Trapped waste pipes fixed	...	17
Water Tests applied	57	
Smoke Tests applied	53	
Basement kitchen voluntarily closed	...	1
Chimney stacks repaired	...	31
Roofs repaired	...	86
Guttering or downpipes provided or repaired	...	69
Damp walls remedied	...	74
External walls repaired	...	65
Yards paved or repaired	...	17
Footpaths paved or repaired	...	9
Steps provided or repaired	...	16
Staircases repaired	...	4
Defective floors repaired	...	45
Defective windows repaired or renewed	...	292
Additional light and ventilation to rooms provided	...	7
Doors repaired or renewed	...	53
Stoves repaired or renewed	...	42
Coppers repaired	...	1
Defective wallplaster repaired	...	120
Ceilings repaired or renewed	...	115
Dirty walls cleansed	...	90
Dirty ceilings cleansed	...	101
Dustbins provided	...	39
Nuisances from refuse or manure abated	...	19
Nuisances from animals abated	...	6
Dirty premises cleansed (Occupier's neglect)		10
Overcrowding abated	...	6
Water service pipes repaired	...	2
Miscellaneous defects remedied	...	98



### NOTICES.

Informal Notices issued	...	409
Informal Notices complied with	...	405 ø
Statutory Notices served	...	41
Statutory Notices complied with	...	41 ø

ø Includes notices served in previous years.

### HOUSING.

The work done by Sanitary Inspectors is set out in Table V of the Appendix. Of the 111 houses inspected for housing defects, the conditions at 23 premises were recorded in accordance with the Housing Regulations.

Notices issued under S.9 of the Housing Act 1936 for the repair of two dwellings were not complied with by the owners and in their default the Council carried out the work.

One dwelling, which was made the subject of a Demolition Order in February 1949, was demolished by the owner.

My comments in last year's report regarding the 'repair' position apply to-day. There appears to be no evidence of any enthusiasm in government circles to solve the very difficult problem as to who is to bear the burden of repairing houses which under existing legislation must be classified as dwellings which cannot be repaired at a reasonable cost.

While new houses are appearing throughout the district at a steady rate, the condition of very old property is steadily worsening through lack of repair, and I think the time has arrived when a start should be made in this district to arrange for the bad type of housing to be demolished to make way for new accommodation. With the approval of the Housing and Public Health Committees, clearance procedure will soon again form part of the Council's housing activities.

The temporary camping site at Warlingham was occupied by about 36 caravans used throughout the year as dwellings.

### CESSPOOL EMPTYING.

Motor emptiers as under, were used for pumping out cesspools during 1951:

<u>Vehicle</u>	<u>Purchased</u>	<u>Used.</u>
One 750 gallons emptier	1938	1.1.51 to 31.7.51
One 800 gallons emptier	August 1951	1.8.51 to 31.12.51
One 800 gallons emptier	January 1950	Whole of year
One combined gully/ 800 gallons cesspool emptier	June 1946	Only occasionally.



The work done by these emptiers is given below together with comparative figures for other years:

<u>Area.</u>	<u>1951</u> <u>Loads</u>	<u>1950</u> <u>Loads</u>	<u>1949</u> <u>Loads</u>	<u>1939</u> <u>Loads</u>	<u>1938</u> <u>Loads</u>	<u>1937</u> <u>Loads</u>
Caterham	141	169	150	178	464	274
Warlingham	110	134	130	239	127	169
Chaldon	2194	2006	1710	822	783	820
Woldingham	1681	1527	1078	1077	1224	1017
	-----	-----	-----	-----	-----	-----
	4126	3836	3068	2316	2598	2280
	-----	-----	-----	-----	-----	-----

This table shows the continuous increase in this work. I have suggested to the Public Health Committee that the increasing cost of emptying and the present state of development in Chaldon renders necessary the early extension of sewers to this area.

At 72 premises in the urban district the cesspool was emptied 12 or more times during the year and the residents of these premises would undoubtedly welcome an opportunity of forgetting the need for arranging for the emptying of those noisome underground pools called cesspools.

#### SUPERVISION OF FOOD.

##### SLAUGHTERHOUSES.

Slaughtering of animals for human consumption is carried out at two slaughterhouses in this district. One is situate on a farm of the South West Metropolitan Regional Hospital Board at Caterham-on-the-Hill, which supplies meat to the Board's hospitals, and the other is located at privately owned premises, licenced annually by the Council for the purpose of ensuring that pigs produced locally under the Self Suppliers of Pigs scheme are slaughtered humanely at satisfactory premises and that the carcasses and offal are examined by a competent Meat Inspector.

Meat Inspected and condemned at Slaughterhouses:

	<u>Cattle</u> <u>excl.cows.</u>	<u>Cows</u>	<u>Calves</u>	<u>Sheep &amp;</u> <u>Lambs</u>	<u>Pigs</u>	<u>Goats.</u>
Number of animals killed	2	16	10	-	132	4
Number of carcasses inspected.	2	16	10	-	132	4
<u>All diseases except</u> <u>Tuberculosis:-</u>						
Whole carcasses condemned	-	-	-	-	-	-
Carcasses of which some part or organ was condemned	-	7	-	-	3	-
Percentage of the number inspected affected with disease other than Tuberculosis.	-	43.8	-	-	2.27	-
<u>Tuberculosis only:-</u>						
Whole carcasses condemned	-	-	-	-	-	-
Carcasses of which some part or organ was condemned.	-	-	-	-	2	-
Percentage of the number inspected affected with Tuberculosis.	-	-	-	-	1.5	-

## WHOLESALE DEPOTS, RETAIL SHOPS AND CANTEENS.

Meat and Other Foods condemned as unfit for human consumption at Food Premises other than slaughterhouses:

### MEAT.

Bacon	15 $\frac{1}{2}$ lbs.
Beef - Home Killed	489 $\frac{1}{2}$ lbs.
Mutton - Home Killed	9 $\frac{1}{2}$ lbs.
Mutton - Imported	2 $\frac{3}{4}$ lbs.
Pork - Home Killed	2 lbs.
Minced Steak (cooked)	38 lbs.
Sausages	43 lbs.

### FISH.

Dog Fish	49 lbs.
Skate	66 $\frac{1}{2}$ lbs.
Salmon	10 lbs.

### CANNED MEAT.

Beef	35 lbs.
Mutton	6 lbs.
Ham	759 $\frac{1}{2}$ lbs.
Other Canned Meat	38 tins.

### OTHER CANNED FOODS.

Fish	28 tins.
Fruit	522 tins.
Milk	84 tins.
Preserves	47 tins.
Vegetables	196 tins.

### OTHER FOODS.

Biscuits	44 lbs.
Butter	3 lbs.
Fish & Meat Paste	18 tins/jars.
Peach Pulp	8 lbs.
Pease Pudding	1 tin
Pickles	4 jars
Potato Powder	28 lbs.
Puddings	16 tins
Soup	32 tins
Spaghetti	2 tins
Sweet Corn	1 tin
Sultanas	3 $\frac{1}{2}$ lbs.

### EXTRANEIOUS MATTER IN FOOD.

Complaints were received in 1951 regarding the presence of extraneous matter in boxes labelled "Choice Cleaned Sultanas" which had been imported from the Levant. These complaints were investigated and subsequently referred to the Hygiene Division of the Ministry of Food who explained the difficulties which were at that time operating to prevent the successful shipping to this country of a sufficient quantity of cleaned dried fruit.

This department, working in co-operation with the County Food and Drugs Inspector, failed to discover how a sample of sugar taken from an opened carton, in the possession of a local shop-keeper and bearing the name of well known sugar refiners, came to be heavily contaminated with Epsom Salts. A complaint regarding the consumption in tea by two people - one a visiting lorry driver - of the contaminated



sugar was written off as one of the department's unsolved mysteries. Our enquiries revealed that the method of filling cartons with sugar left no doubt as to the impossibility of one and only one carton becoming contaminated.

#### MILK.

##### Distributors on Register at end of 1951.

Distributors with dairies within		
Urban District	...	7
Distributors with dairies outside		
Urban District	...	2
Distributors selling milk from local		
shops only in sealed		
bottles	...	5

117 visits were made to dairies during the year. No important additions or alterations were made at local dairies in 1951.

#### Dealer's Licences.

The following licences under the Milk (Special Designation) (Raw Milk) Regulations 1949/50 and the Milk (Special Designation) (Pasteurised and Sterilised) Milk Regulations 1949/50 were issued by the Council:-

##### Dealer's Principal Licences:

Tuberculin Tested	...	7
Pasteurised	...	7
Sterilised	...	7

##### Dealer's Supplementary Licences:

Tuberculin Tested	...	2
Pasteurised	...	2
Sterilised	...	2

The Public Health Committee issued a caution to one milk dealer in regard to a breach of the licensing conditions in respect of the sale of Tuberculin Tested Milk.

#### Pasteuriser's Licences.

The issue of these licences is the province of the County Council as the Food and Drugs Authority, and your Sanitary Inspectors act as agents for the County Council for purposes of sampling and the supervision of pasteurising plants. The number of local pasteurising establishments was decreased from 4 to 3 during the year.

#### Sampling.

The results of tests on samples of milk taken during 1951 are given overleaf:-

### Processed Milk.

<u>Tuberculin Tested Milk (Pasteurised).</u>	<u>Passed</u>	<u>Failed.</u>
Methylene Blue (to check probable keeping quality)	62	-
Phosphatase (to check efficiency of heat treatment)	60	2

### Pasteurised Milk.

Methylene Blue	...	135	1
Phosphatase	...	134	2

### Sterilised Milk.

Turbidity	...	2	-
-----------	-----	---	---

### Heat-Treated Milk(sold as Ungraded)

Methylene Blue	...	2	-
Phosphatase	...	1	1

### Raw Milk.

#### Tuberculin Tested Milk.

Biological	...	1	-
Methylene Blue	...	2	-

#### Raw Milk (Ungraded)

Biological	...	4	-
Methylene Blue	...	18	1

These results indicate satisfactory control over the processing, storage and distribution of milk by the dairymen concerned.

Three samples of milk were also tested for the presence of sodium chlorate - the detector used in standard cleansing solutions - with negative results.

Less than 1% of the fluid milk sold in this district in 1951 was ungraded raw milk.

### ICE-CREAM.

Only one registration of premises in this district for the manufacture of ice-cream has been made, and the manufacturer concerned uses a complete cold mix. All samples taken from this manufacturer were placed in Grade I.

50 other premises are registered for the sale of ice-cream and the majority of the retailers obtain their supplies from well known manufacturers. Five certificates of registration were issued during the year.

70 samples of ice-cream were submitted to the Methylene Blue test by the Public Health Laboratory Service with the following results:-



Ministry's provisional Grade	Number	Samples % of total	% in 1950
1	41	58.57	54.29
2	17	24.30	28.57
3	12	17.13	12.86
4	Nil	00.00	4.28

The results indicate a further slight improvement in the bacteriological quality of ice-cream. 11 of the 12 samples classified as unsatisfactory in Grade 3 were taken from ice-cream supplied to local retailers by the same manufacturer, and a source of contamination was traced to this manufacturer's plant.

The temperature of ice-cream held in stock by retailers was checked at a number of premises and in no case was it found to be above 28°F

Samples were submitted for analysis for fat content by the County Food & Drugs Inspector and all contained the requisite quantity of fat.

#### WATER ICES.

7 water ices - 2 wrapped and 5 unwrapped - were examined; 6 were Grade 1 and one (wrapped) was placed in Grade 3.

#### FOOD HYGIENE

As in past years, close attention was paid to premises where food was prepared, stored or exposed for sale, and also to vehicles used for the transport of food.

The following improvements (excluded from the table of Sanitary Improvements on page 20) were obtained at food premises:-

Roofs repaired	...	2
Chimney stacks repaired	...	1
Floors repaired	...	2
Floor covering renewed	...	1
Walls repaired	...	4
Ceilings repaired	...	1
Dirty walls cleansed	...	33
Dirty ceilings cleansed	...	19
Dirty floors cleansed	...	3
Accumulations of rubbish removed	...	4
Dustbin provided	...	1
Drains unstopped and cleansed	...	2
Running hot water supply provided	...	14
Sinks or lavatory basins provided	...	4
Impervious splash area provided to sinks	...	2
Plate rack supplied	...	1
Apparatus cleansed	...	2
Supply of clean towels arranged	...	3
Light and ventilation improved	...	4
W.C.fittings repaired or renewed	...	2
Overalls provided for staff	...	1

Further improvement in the equipment and condition of meat delivery vans was also noticeable in 1951 and the aesthetic feelings of the consuming public were less frequently outraged by the conditions under which carcasses and offal of home-killed animals were brought to local purveyors of meat from the slaughterhouse situate some 8 miles away. As previously indicated, however, the provision of improved facilities for cooling and storage at central slaughterhouses and a plentiful supply of suitable covering materials are required before the meat transport problem can be satisfactorily determined.

Since the Council's adoption of bye-laws for securing the observance of sanitary and cleanly conditions and practices in connection with the handling etc. of food, the absence of flies and wasps from the windows of local food shops has been noted.

Posters relating to the prevention of food poisoning were exhibited in one health propaganda shop window.

#### DESTRUCTION OF RATS AND MICE.

The year's work is summarised hereunder:-

Number of Complaints received and			
	investigated	...	157
" " Independent investigations			
	made	...	685
" " Premises found to be			
	infested by rats	...	196
" " Premises found to be			
	infested by mice	...	27
" " Premises treated and cleared:			
(i) by Local Authority's			
	operators	...	192
(ii) by Occupiers		...	9

Estimated Kill with poison used by  
Local Authority's operators:

Rats	...	631
Mice	...	12

(Bodies recovered: Rats 280, Mice 7)

Killed by means other than poisoning  
by Local Authority's operators:

Rats	...	16
Mice	...	153

In addition, the routine annual testing of sewers, required by the Ministry of Agriculture & Fisheries, was carried out in August 1951, when 135 manholes were test-baited and 2 "takes" were recorded. The necessary treatment was carried out and resulted in an estimated kill of 15 rats. The second half-yearly poisoning was carried out in February 1952. Four dry sewer-ends used by rats were sealed.

Infestations at only 5 properties were classified as "major" infestations, and no very large infestation of the "reservoir" type was found. It was again demonstrated, however, that a number of residents when feeding their domestic animals or wild birds also unwittingly fed rats.



The practice of charging for treatments at private dwelling-houses was reviewed by the Council in 1951, and, provided the full co-operation of the occupants if forthcoming, rodent control at private dwellings is now one of the Council's 'protective' activities and the services of the Rat Catcher are made available without charge.

The Department has continued to act as Servicing Agent to the County Council at schools and at six school canteens.

Co-operation with officers of neighbouring authorities, of the County Agricultural Executive Committee and of the Divisional Headquarters of the Ministry of Agriculture & Fisheries was again maintained at quarterly meetings of the No. 3. Workable Area Committee, which was set up in 1944 to bring about concerted action in Rodent Control by groups of contiguous authorities.

#### DISINFECTION.

Number of rooms sprayed or fumigated	...	16
Bundles of bedding disinfected	...	11
Library books fumigated	...	352

#### DISINFESTATION.

Number of rooms sprayed or fumigated	...	11
Bundles of bedding & clothing disinfested		2
Wasps nests destroyed	...	63

I am,

Mr. Chairman, Ladies & Gentlemen,

Your obedient Servant,

JOHN J. CARDEN

Chief Sanitary Inspector.

June 1952.  
C/ALL/1/DRG.

Table I.

THE URBAN DISTRICT COUNCIL OF CATERHAM AND WARLINGHAM  
1951.

Public Health Committee.

Chairman: Councillor A. H. James.

Councillor A.H.Bartley. Councillor J. Roberts.

"	H.W.Dailey.	"	Mrs.K.M.C.Sims.
"	W. Howes.	"	Dr. H. Trafford.
"	F. Reynolds.		

Ex-officio: Councillor B. J. Jessup, J.P.

Public Health Department.

STAFF:

Medical Officer of Health:

■ F. R. Edbrooke, M.B.,Ch.B., D.P.H.

Deputy Medical Officer of Health:

■ M.Sutcliffe,M.A.,M.B.,B.Chir.,D.P.H.

Chief Sanitary Inspector:

∅ John J. Carden,M.S.I.A., A.R. San.I.

Additional Sanitary Inspectors:

∅ F.R.Allerton, M.S.I.A.

∅ E.R.Rogers, A.S.I.A., A.R.San.I.

Senior Clerk:

A.H.Hadlow

Clerks:

Mrs. L.A.Capon

Mrs.I.M.Sales (to 31.5.51)

Miss D.C.Borner(to 20.10.51)

Mrs. D.R.Gaskell (from 19.11.51)

(■ Part-time appointment only to this Council)

∅ Certificate for Inspectors of Meat and Other Foods.



TABLE II

DEATHS OCCURRING DURING THE YEAR 1951.

Cause of death.	Males.	Females.	Total.	Under 1 year	1 and under 2.	2 and under 5	5 and under 15.	15 and under 25.	25 and under 45.	45 and under 55.	65 and over.
Respiratory tuberculosis ...	2	2	4	-	-	-	-	-	3	1	-
Other tuberculosis ...	-	-	-	-	-	-	-	-	-	-	-
Syphilitic disease ...	1	-	1	-	-	-	-	-	-	-	1
Diphtheria ...	-	-	-	-	-	-	-	-	-	-	-
Whooping Cough ...	-	1	1	1	-	-	-	-	-	-	-
Meningococcal infections ...	-	-	-	-	-	-	-	-	-	-	-
Poliomyelitis ...	-	-	-	-	-	-	-	-	-	-	-
Measles ...	-	-	-	-	-	-	-	-	-	-	-
Other infective and parasitic diseases ...	-	-	-	-	-	-	-	-	-	-	-
Malignant neoplasm, stomach ...	3	5	8	-	-	-	-	-	-	3	5
Malignant neoplasm, lung, bronchus ...	10	-	10	-	-	-	-	-	-	8	2
Malignant neoplasm, breast ...	-	5	5	-	-	-	-	-	-	4	1
Malignant neoplasm, uterus ...	-	4	4	-	-	-	-	-	2	1	1
Other malignant and lymphatic neoplasms ...	12	6	18	1	-	-	-	-	2	8	7
Leukaemia ...	2	-	2	-	-	1	-	-	-	-	1
Diabetes ...	-	2	2	-	-	-	-	-	-	1	1
Vascular lesions of nervous system ...	15	24	39	-	-	-	-	-	1	9	29
Coronary disease, angina ...	32	14	46	-	-	-	-	-	1	12	33
Hypertension with heart disease ...	3	2	5	-	-	-	-	-	1	2	2
Other heart disease ...	15	33	48	-	-	-	-	-	-	1	47
Other circulatory disease ...	4	3	7	-	-	-	1	-	2	-	4
Influenza ...	6	5	11	-	-	-	-	-	-	4	7
Pneumonia ...	10	14	24	2	-	-	-	-	-	2	20
Bronchitis ...	8	3	11	-	-	-	1	-	-	3	7
Other respiratory diseases ...	2	-	2	1	-	-	-	-	-	1	-
Ulcer of stomach and duodenum ...	2	-	2	-	-	-	-	-	-	-	2
Gastritis, enteritis and diarrhoea ...	1	-	1	-	-	-	-	-	-	-	1
Nephritis and Nephrosis ...	1	1	2	-	-	-	-	1	-	1	-
Hyperplasia of prostate ...	5	-	5	-	-	-	-	-	1	-	4
Pregnancy, childbirth, abortion ...	-	-	-	-	-	-	-	-	-	-	-
Congenital malformation ...	2	4	6	3	-	-	-	1	1	1	-
Other defined and ill-defined illnesses ...	19	19	38	9	1	-	-	1	-	4	23
Motor vehicle accidents ...	-	3	3	-	-	-	1	-	-	1	1
All other accidents ...	3	1	4	-	-	-	-	1	-	1	2
Suicide ...	1	-	1	-	-	-	-	-	-	1	-
Homicide and operations of war ...	-	-	-	-	-	-	-	-	-	-	-
TOTALS ...	159	151	310	17	1	1	3	4	14	69	201

NOTIFIABLE DISEASES

NOTIFIABLE DISEASES.	Number of cases Notified														Totals											
	At ages - years																									
	At all ages	Military Cases	Under 1 year	1	2	3	4	5	10	15	20	35	45	65 and over												
Scarlet Fever	41	8	-	1	2	3	4	5	10	15	20	35	45	-	24	3	1	-	3	5	3	2	1	-	34	-
Erysipelas	3	-	-	-	-	-	-	1	6	9	1	-	1	-	2	-	-	-	1	-	-	-	-	-	1	1
Typhoid Fever	2	-	-	-	-	-	-	-	-	-	1	1	2	-	2	-	-	-	-	-	-	-	-	-	-	-
Dysentery	36	-	-	-	-	-	-	4	6	3	12	4	4	-	33	1	-	-	-	2	-	1	-	-	-	2
Food Poisoning	1	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Acute poliomyelitis	-	-	-	-	-	1	-	-	-	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
non-paralytic	1	-	-	-	-	-	-	-	-	-	2	2	-	-	3	-	-	-	-	1	-	-	-	-	1	-
Pneumonia	11	-	-	-	-	1	1	2	-	1	3	1	1	-	3	1	-	-	1	-	-	-	-	1	3	24*
Measles	610	1	11	34	45	84	108	277	29	13	6	1	1	1	90	105	55	40	87	16	58	57	65	39	7	2
Whooping cough	146	-	13	20	12	25	15	55	1	1	3	-	1	-	29	37	10	10	8	9	15	4	22	2	1	-
TOTALS	851	9	24	54	60	114	126	356	42	27	26	8	10	4	183	147	68	50	100	31	79	64	87	42	48	27

ø includes 44 cases among patients at St. Lawrence's Hospital.

Deaths from all forms of pneumonia.



TABLE IV

FACTORIES.1. Inspections.

Premises	Number on Register	Number of		
		Inspect- ions	Written Notices	Occupiers prosecuted.
Factories in which Section 1,2,3,4 & 6 are to be enforced by Local Authorities.	13	27	1	-
Factories not included above in which Section 7 is enforced by Local Authorities.	100	120	5	-
Other premises in which Section 7 is enforced by the Local Authority (excluding out-workers' premises).	7	11	1	-
T O T A L	120	158	7	-

2. Defects.

Particulars	Number of cases in which defects were				No. of cases in which prosecution were insti- tuted.
	Found	Re- medied	To H.M. Inspector	Referred By H.M. Inspector	
Want of cleanliness (S.1)	16	19	-	1	-
Overcrowding (S.2)	-	-	-	-	-
Unreasonable temperature (S.3)	-	-	-	-	-
Inadequate ventilation (S.4)	-	1	-	-	-
Ineffective drain- age of floors (S.6)	-	-	-	-	-
sanitary Conveniences (S.7)					
(a) insufficient	1	-	-	1	-
(b) unsuitable or defective	10	11	-	1	-
(c) not separate for sexes	-	-	-	-	-
Other offences against the Act (not including offences relating to outwork)	7	3	-	-	-
T O T A L	34	34	-	3	-

3. Defaults, etc, notified by H.M. Inspector  
of Factories on Form 144:-

Notified	...	3
Remedied	...	2

Table V

HOUSING STATISTICS

(a) New Houses.

Number of New Houses erected during the year:-

(i)	By Local Authority	...	58
(ii)	By other Local Authorities	...	Nil
(iii)	By other bodies and persons	...	
	(a) War damage rebuilds		2
	(b) New dwellings		<u>13</u>
			<u>15</u>
			<u>73</u>

(b) Existing Houses.

1. Inspection of Dwelling-houses during the year.

Total number of dwelling-houses  
inspected for housing defects  
(under Public Health or Housing  
Acts) ... 111

2. Remedy of Defects during the year without  
Service of Formal notices.

Number of defective dwelling-  
houses rendered fit in  
consequence of informal action  
by the Local Authority or  
their Officers ... 102 ø

3. Action under Statutory Powers during the year.

(a) Proceedings under Sections 9,  
10 and 16 of the Housing Act, 1936.

(i) No. of dwelling-houses  
in respect of which notices  
were served requiring  
defects to be remedied ... 13

(ii) No. of dwelling-houses in  
which defects were remedied  
after service of formal  
notices

(a) By Owners ... 14 ø  
(b) By Local Authority in  
default of Owners ... 2

(b) Proceedings under Public Health Acts.

(i) No. of dwelling-houses in  
respect of which notices were  
served requiring defects to  
be remedied ... 28

ø includes notices served in previous years.



- (ii) No. of dwelling-houses in which defects were remedied after service of formal notices:-  
 (a) By Owners ... 23 Ø  
 (b) By Local Authority in default of Owners ... 1
- (c) Proceedings under Section 11 and 13 of the Housing Act, 1936
- (i) No. of dwelling-houses in respect of which Demolition Orders were made ... Nil
- (ii) No. of dwelling-houses demolished in pursuance of Demolition Orders ... 1
- (iii) No. of dwelling-houses in which defects were remedied by Owner after service of Section 11 notice ... Nil
- (d) Proceedings under Section 12 of the Housing Act, 1936 ... Nil.

#### 4. Overcrowding.

- (a)(i) No. of dwellings overcrowded at the end of the year ... 9
- (ii) No. of families dwelling therein ... 9
- (iii) No. of persons dwelling therein ... 58
- (b) No. of cases of overcrowding reported during the year .. 8
- (c)(i) No. of cases of overcrowding relieved during the year .. 6
- (ii) No. of persons concerned in such cases. ... 26
- (d) No. of cases in which dwelling-houses have again become overcrowded after the Local Authority have taken steps for the abatement of overcrowding ... Nil

Ø includes notices served in previous years.

Table VI

FOOD AND DRUGS ACT, 1938.

Statement on the number of samples taken during 1951.

ARTICLES	Analysed			Adulterated or Irregular.		
	Formal	Informal	Total	Formal	Informal	Total.
<u>FOOD.</u>						
Milk	58	25	83	3	3	6
Cake decorations	-	3	3			
Cherries - cocktail.	-	1	1			
Dried fruit and sugar	-	1	1			
Fish paste	-	2	2			
Malt food beverage	-	1	1			
Meat, cooked and prepared.	-	1	1			
Pepper	-	1	1			
Salad Cream	-	4	4			
Sausage Meat	-	1	1			
Tomato spread	-	1	1			
<u>DRUGS.</u>						
Ammoniated tincture of Quinine	-	1	1			
Antiseptic powder	-	1	1			
Cough Mixture	-	1	1			
Nasal compound	-	1	1			
Talcum powder	-	1	1			
<b>TOTALS</b>	<b>58</b>	<b>46</b>	<b>104</b>	<b>3</b>	<b>3</b>	<b>6</b>



